



PO No. | 4500053398

| | | |
|--|---|--|
| Ship To: Center ID: FLSC SDFD LFGRD SVCS CENTRAL LIFEGUARD SERVICES MS 32A 2581 QUIVIRA CT SAN DIEGO CA 92109-8302 | Bill To: SDFD LFGRD SVCS CENTRAL LIFEGUARD SERVICES MS 32A 2581 QUIVIRA CT SAN DIEGO CA 92109-8302 | Date: 07/12/2014 Page 1 of 2 |
| Vendor: Boundtree Medical Llc PO Box 8023 Dublin OH 43016-2023 | | Billing Contact: REGINA CHARTIER Telephone: |
| Vendor ID: 20000096 | | Terms: within 30 days Due net Delivery Terms: FREE ON BOARD DEST Deliver on or before: 06/30/2015 |
| Phone: 800-533-0523 | | Buyer: Leslie Valdez Telephone: 619-236-7090 |

| Line # | Item ID/Description | Quantity/UM | Unit Price | Extended Price |
|--------|---|-------------|------------|----------------|
| 1 | MEDICAL SUPPLIES;15-0008 Provide medical supplies and equipment as may be required by the City from 7/01/2014 through 6/30/2015. PR #10049374 Billing Contact: Nicole Rao nrao@sandiego.gov | 25,000 EA | USD 1.00 | USD 25,000.00 |

**SEE LAST PAGE
FOR TOTAL**

To ensure prompt payments, PO # must appear on all shipments and invoices; and, all invoices must be directed to *Billing* Contact person at *Bill-To* address listed above



City of San Diego

PURCHASE ORDER

PO No. **4500053398**

| | | | | | | | |
|---|----------------------------|---|-------------------|---|--|--|--|
| Ship To: SDFD LFGRD SVCS CENTRAL LIFEGUARD SERVICES MS 32A 2581 QUIVIRA CT SAN DIEGO CA 92109-8302 | | Center ID: FLSC | | Bill To: SDFD LFGRD SVCS CENTRAL LIFEGUARD SERVICES MS 32A 2581 QUIVIRA CT SAN DIEGO CA 92109-8302 | | Date: 07/12/2014 Page 2 of 2 | |
| | | | | | | Billing Contact: REGINA CHARTIER | |
| | | | | | | Telephone: | |
| Vendor: Boundtree Medical Llc PO Box 8023 Dublin OH 43016-2023 | | | | Terms: within 30 days Due net | | | |
| | | | | Delivery Terms: FREE ON BOARD DEST | | | |
| | | | | Deliver on or before: | | | |
| Vendor ID: 20000096 | | | | Phone: 800-533-0523 | | | |
| | | | | Buyer: Leslie Valdez | | | |
| | | | | Telephone: 619-236-7090 | | | |
| Line # | Item ID/Description | Quantity/UM | Unit Price | Extended Price | | | |
| | Notes: | | | | | | |
| Notes: The Terms and Conditions of this Purchase Order are available at http://sandiego.gov/purchasing/ | | Line Item Total \$ | | 25,000.00 | | | |
| | | Tax \$ | | 0.00 | | | |
| | | PO Total \$ | | 25,000.00 | | | |
| | | IMPORTANT! | | | | | |
| | | To ensure prompt payments, PO # must appear on all shipments and invoices; and, all invoices must be directed to <i>Billing</i> Contact person at <i>Bill-To</i> address listed above | | | | | |